MONDAY THE 5TH FEBRUARY 2007

CHARLES JAY WOLFF
281 NORTH STATE STREET
CONCORD, NEW HAMPSHIRE
03301

U.S. DISTRICT COURT
DISTRICT OF N.H.
FILED

2007 FEB -7 A 10:51

GOODMORNING - MR JAMES R. STARR CLERK
OF THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW HAMPSHIRE

REF: CHARLES JAY WOLFF
v.
NEW HAMPSHIRE DEPARTMENT
OF CORRECTIONS, ET AL.
CIVIL NO. 06-CV-321-PB
DATED: JANUARY 26, 2007

UNDER THE "REPORT AND RECOMMENDATION" FROM HIS HONOR JAMES R. MUIRHEAD UNITED STATES MAGISTRATE JUDGE. I GIVE FORTH THE FOLLOWING INFORMATION.

PAGE#3 1. "ALTHOUGH HE HAS NOT IDENTIFIED HIS AFFILIATION WITH A PARTICULAR RELIGION."

REPLY - I AM AN ORTHODOX JEW OF THE JEWISH FAITH, A KOHEN BY BIRTH SON OF A COHEN
I AM AN ORTHODOX HIGH PRIEST

2. "A BLAND DIET - - - MEDICAL CONDITION"

REPLY - DURING SERVICE IN THE UNITED STATES MILITARY IN VIETNAM I WAS IN ANGUAL HOSPITAL FOR DYSENTERY,

A. I RECEIVED MEDICATION WHILE IN VIETNAM
B. I RECEIVED MEDICATION FROM THE VA
C. I RECEIVE MEDICATION FROM THE DEPARTMENT OF CORRECTIONS CONCORD, NH MEDICAL DEPARTMENT WHICH IN FACT THE MEAL I RECEIVED BEFORE AND AFTER GAVE ME CRAMPS AND DIARRHEA ETC.

NOTE: I HAVE STAFF OF THE DEPARTMENT OF CORRECTIONS NEW-HAMPSHIRE TO PROVE THIS

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PAGE 8. LAST PARAGRAPH, "THERE IS NO INDICATION IN THE RECORD THAT MONE DENIED WOLFF A KOSHER DIET ETC".

NOTE: ENCLOSED PLEASE FIND A PHOTO COPY OF MY GRIEVANCE OF GENCY MONE REJECTED AND COMPLETED FROM THE COMMISSIONERS OFFICE OF THE DEPARTMENT OF CORRECTIONS OF THE STATE OF NEW HAMPSHIRE DATED 12/23/05 FROM GREG CRIMPTON (WHO ALSO TOOK MY DIET AWAY SAYING I DO NOT DESERVE A KOSHER DIET AND REMARKED THAT HE IS AN ANTI-SEMITE.) PAGE #2 AND #3 SO OBVIOUS.

I HERE BY WITH THIS DOCUMENT FILE THE OBJECTION TO DISMISS THE SUIT AGAINST GENCY MONE AND AT THIS TIME I ALSO FILE A VIOLATION AGAINST GENCY MONE BY THE FLAVOR OF HER LANGUAGE AS STATED BY MR. JAMES KLIMAVICH AND OF MR. WILLIAM BUMFORD IN DOCUMENT FORM. A CLEAR VIOLATION OF 5 A.L.R 4TH 956, "VALIDITY AND CONSTRUCTION OF STATUTES OR ORDINANCE PROHIBITING PROFANITY OR PROFANE SWEARING OR CURSING", CIVIL LIABILITY FOR INSULTING OR ABUSIVE LANGUAGE - MODERN STATUS 20 A.L.R. 4TH 773, VALIDITY AND CONSTRUCTION OF STATUTE OR ORDINANCE PROHIBITING USE OF "OBSCENE" LANGUAGE IN PUBLIC. 2 A.L.R. 4TH 1331, ..

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MODERN CONCEPT OF OBSCENITY. 5.A.L.R. 3d 1158, VALIDITY OF PROCEDURES DESIGNED TO PROTECT THE PUBLIC AGAINST OBSCENITY. 5 A.L.R. 3d 1214, DEFAMATORY NATURE OF STATEMENTS REFLECTING ON PLAINTIFF' RELIGIOUS BELIEFS, STANDING, OR ACTIVITIES 87 A.L.R. 2d 453, CONSTITUTION OF THE STATE OF NEW HAMPSHIRE PART FIRST BILL OF RIGHTS, [ART] 5. [RELIGIOUS FREEDOM RECOGNIZED, DEPARTMENT OF CORRECTIONS OF THE STATE OF NEW HAMPSHIRE CODE OF ETHICS POLICY AND PROCEDURE DIRECTIVE #2.30 (ENCLOSED. "MEMBERS SHALL REFRAIN FROM DISCRIMINATING AGAINST ANY INDIVIDUAL BECAUSE OF RACE, GENDER, CREED, NATIONAL ORIGIN, RELIGIOUS AFFILIATION, AGE, DISABILITY, OR ANY OTHER TYPE OF PROHIBITED DISCRIMINATION." MEMBERS SHALL RESPECT, PROMOT AND CONTRIBUTE TO A WORK PLACE THAT IS SAFE, HEALTHY, AND FREE OF HARASSMENT IN ANY FORM."

THE STATE OF NEW HAMPSHIRE, AS A STATE OF THE UNITED STATES OF AMERICA HAS ALSO VIOLATED THE UNIVERSAL DECLARATION OF HUMAN RIGHTS SIGNED ON DECEMBER 10, 1948 AT THE UNITED NATIONS WHEN THE (ENCLOSED) FOLLOWING EMPLOYEES OF THE STATE OF NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS

1. DAN WAUGH
2. JAY NAGY
3. JOHN KOVAU
4. WARDEN CATTELL

GAVE ME A CHOICE "TO LEARN WHAT IS OFFERED OR TO LEAVE THE PROGRAM." THIS IS AND WAS WRITTEN BY ROBERT KALL
NOTE: MR. ROBERT KALL TOLD ME TO WRITE THIS INMATE REQUEST SLIP SO HE COULD OBTAIN THESE ITEMS FOR ME. ALSO I MET WITH WARDEN BRUCE CATTELL AND TOLD HIM I WOULD

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PURCHASE OR HAVE MY BROTHER DONATE THE ITEMS V/A A CATALOG SELECTED BY THE WARDEN TO ENABLE MYSELF OR ANYONE ELSE WHO WOULD BE SELECTED INTO THE CLASS WHO FOLLOWED THE SAME LAWS AS I DO. THE WARDEN REJECTED THIS PLEASE SEE INMATE REQUEST SLIP DATED 11-3-05 REPLY FROM ROBERT KROLL WHO ALSO STALLED TO LET ME IN THE PROGRAM WHILE SEVERAL NON-JEWISH INMATES WERE ALLOWED TO TAKE THE PROFESSIONAL FOOD SERVICE PROGRAM. (ENCLOSED)

AT THIS TIME I AMEND MY FEDERAL SUIT AGAINST THE NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS, ETAL TO INCLUDE EQUAL RELIGIOUS RIGHTS OF RELIGION TO ALLOW AND TO HAVE IN THE POSSESSION AS ALLOWABLE PERSONAL ITEMS UNDER PPD 7.17 "FOLLOWERS OF JUDAISM, (1) TALLIT (JEWISH PRAYER SHAWL, TEFILLIN (PHYLACTERIES), JEWISH PRAYER BOOKS AND STUDY GUIDES, DREIDEL (JEWISH TEACHING TOP) KOSHER SPECIAL FOODS AS REQUIRED AND APPROVED BY FEDERAL LAW I.E. JEWISH HOLIDAY OF PASSOVER. (ENCLOSED)

IN THE OVER ALL VIEWS I WROTE TO THE DIETICIAN ON 12-8-05 IN RESPECT TO RSA 301.03, REPLY FROM A JOYCE LEARA A SUPERVISOR OF THE NEW HAMPSHIRE STATE PRISON RELEASE MEDICAL DEPARTMENT (ENCLOSED) "WE CURRENTLY DO NOT HAVE A DIETICIAN, WHAT IS YOUR QUESTION?, I WROTE TO DR. ROBERT MACLEOD MD DIRECTOR OF THE DEPARTMENT OF CORRECTIONS OF THE STATE OF NEW HAMPSHIRE ON 2-8-2006 BECAUSE OF THE LACK OF A DIETICIAN..

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ON 2/22/06 DR. BOB MACLEOD TOLD ME IN REGUARDS TO MY NUTRISINAL PROBLEM (ENCLOSED) "THIS IS A RELIGIOUS ISSUE OTHER NUTRISINAL CONCERNS PLEASE CONTACT HEALTH SVCS".

THE QUESTION I HAVE TO THE DIRECTOR OF ALL MEDICAL TO INCLUDE A DIEATICIAN AND NUTRISIONAL MATTERS OF ALL THE IN HOUSE INMATE POPULATION DID NOT CARE FOR THE HEALTH OF A JEWISH INMATE YES, THIS IS TRUE, PLEASE SEE (ENCLOSED.)

ENCLOSED PLEASE FIND THE FOLLOWING ① A PHOTO COPY OF THE GRIEVANCE OF DEACON JAMES DALY DATED JUNE 28TH 2006 WHICH HAS WARDEN BRUCE CATTELL REPLY DATED JUNE 27TH 2006 "THE CHAPLAIN TOOK APPRORIATE ACTION UNDER THE PPD" NOTE: ENCLOSED PLEASE FIND PPD 7.17 DATED 7/25/06 G. SPECIAL RELIGIOUS NEEDS WHICH VIOLATE N.H. ADMIN RULES COR 301.03(M), UNDER PROCEDURES LETTER (d) THE INMATE UNIT MANAGER NOT THE CHAPLAIN CAN TAKE YOU OFF YOUR RELIGIOUS DIET THUS THE CHAPLAIN JAMES DALY AND WARDEN BRUCE CATTELL VIOLATED BOTH MY FEDERAL AND STATE RIGHTS OF RELIGIOUS FREEDOM. LETTER (F) DIETICIAN NOTES IT IS THE WARDEN WHO APPROVES A RELIGIOUS DIET NOT THE CHAPLAIN. ON JUNE 28TH 2006, I

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FILED THE GRIEVENCE AGAINST JAMES DALY TO THE COMMISSIONER OF THE DEPARTMENT OF CORRECTIONS OF THE STATE OF NEW HAMPSHIRE MR. WILLIAM WRENN. FROM THE COMMISSIONERS OFFICE DATED 7/5/06 I WAS DENIED BY A GREG CROMPTON.

UNDER THE NEW REVISED PPD 7.17 IT STATES THAT ONLY YOUR UNIT MANAGER HAD THE AUTHORITY TO TAKE A PERSON OFF A RELIGIOUS DIET. THIS WAS PUT INTO EFFECT DURING A MEETING BETWEEN WARDEN BRUCE CATTELL MY UNIT MANAGER MR. JOHN KOVACS AND MYSELF. THE MEETING WAS HELD PRIOR TO 11-16-05 AS STATED BY WARDEN BRUCE CATTELL REPLY TO ME DATED 12/2/05 "THERE IS A PROBLEM YOUR UNIT MANAGER WILL CALL YOU IN TO DISCUSS THE PROBLEM AND DECIDE WHAT IF ANY ACTION WILL NEED TO BE TAKEN." (ENCLOSED). JAMES DALY WAS NOT MY UNIT MANAGER.

RESPECTFULLY,

Charles J Wolff

CC ATTORNEY JOHN VINSON esq
THE DEPARTMENT OF CORRECTIONS
ATTORNEY FOR THE STATE OF
NEW HAMPSHIRE.

NH DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE DIRECTIVE	CHAPTER Personnel STATEMENT NUMBER 2.30
SUBJECT: **DOC CODE OF ETHICS** PROPONENT: **John Vinson, Staff Attorney** *Name/Title* Commissioner's Office 271-5604 *Office* *Phone #*	EFFECTIVE DATE 06/01/05 REVIEW DATE 11/15/06 SUPERCEDES PPD# 2.30 DATED 11/15/03
ISSUING OFFICER: *Stephen J. Curry, Commissioner*	DIRECTOR'S INITIALS BW DATE 6-3-05
	APPENDIX ATTACHED: YES ____ NO ____
REFERENCE NO: See reference section on last page of PPD.	

I. PURPOSE:
To establish a code of ethics for Department of Corrections employees that guards against conflicts that adversely affects the agency.

II. APPLICABILITY:
To all staff

III. POLICY:

A. It is the policy of the Department of Corrections to adhere to the Code of Ethics promulgated by the American Correctional Association (ACA), as well as the Executive Branch Code of Ethics.

B. Department of Corrections employees are responsible for following the ideals and principles embodied in the ACA Code (attachment I) and the Executive Branch Code of Ethics as ordered by the Governor through executive order (attachment 2).

C. Failure to abide by the Code of Ethics will result in discipline in accordance with the New Hampshire Division of Personnel Administrative Rules and PPD 2.16.

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards
2-CO-1C-24

Standards for Adult Correctional Institutions
Fourth Edition Standards
4-4069

Standards for Adult Probation and Parole Field Services
Third Edition. Standards
3-3068

Standards for Adult Community Residential Services
Fourth Edition Standards

Other
NH Division of Personnel Admin. Rules
PPD 2.16

VINSON/pf

Attachments

American Correctional Association
Code of Ethics

Preamble

The American Correctional Association expects of its members unfailing honesty, respect for the dignity and individuality of human beings and a commitment to professional and compassionate service. To this end, we subscribe to the following principles:

Members shall respect and protect the civil rights of all individuals.

Members shall treat every professional situation with concern for the welfare of the individuals involved and with no intent to personal gain.

Members shall maintain relationships with colleagues to promote mutual respect within the profession and improve the quality of service.

Members shall make public criticism of their colleagues or their agencies only when warranted, verifiable and constructive.

Members shall respect the importance of all disciplines within the criminal justice system and work to improve cooperation with each segment.

Members shall honor the public's right to information and share information with the public to the extent permitted by law subject to individual's right to privacy.

Members shall respect and protect the right of the public to be safeguarded from criminal activity.

Members shall refrain from using their position to secure personal privileges or advantages.

Members shall refrain from allowing personal interest to impair objectivity in the performance of duty while acting in an official capacity.

Members shall refrain from entering into any formal or informal activity or agreement which presents a conflict of interest or is inconsistent with the conscientious performance of duties.

Members shall refrain from accepting any gifts, service, or favor that is or appears to be improper or implies an obligation inconsistent with the free and objective exercise of professional duties.

Members shall clearly differentiate between personal views/statements and views/statements/positions made on behalf of the agency of Association.

Members shall report to appropriate authorities any corrupt or unethical behaviors in which there is sufficient evidence to justify review.

Members shall refrain from discriminating against any individual because of race, gender, creed, national origin, religious affiliation, age, disability, or any other type of prohibited discrimination.

Members shall preserve the integrity of private information; they shall refrain from seeking information on individuals beyond that which is necessary to implement responsibilities and perform their duties; members shall refrain from revealing nonpublic information unless expressly authorized to do so.

Members shall make all appointments, promotions, and dismissals in accordance with established civil service rules, applicable contract agreements, and individual merit, rather than furtherance of personal interests.

Nurse

Members shall respect, promote and contribute to a work place that is safe, healthy and free of harassment in any form.

Adopted August 1975 at the 105th Congress of Correction
Revised August 1990 at the 120th Congress of Correction
Revised August 1994 at the 124th Congress of Correction

State of New Hampshire

CODE OF ETHICS

The following Code of Ethics shall govern the conduct of all Executive Branch employees and officials.

- **I. Declaration of Policy**
  It is hereby declared to be the policy of the state that no public official or employee of a state agency shall have any interest, financial or otherwise, direct or indirect, engage in any business transaction or professional activity, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties. To implement this policy and to enhance the faith and confidence of the people of the state in their government, this code of ethics sets forth standards of conduct required of officials and employees of the Executive Branch in the performance of their official duties.
  It is declared to be the policy of the state that public officials and employees are bound to perform their duties efficiently and faithfully under the laws of the state of New Hampshire. Such officials and employees are bound to observe the highest standards of ethics consistent with this code regardless of personal considerations, recognizing that promoting the public interest and maintaining the respect of the people in their government must be of foremost concern.
- **II. Definitions**
  As used herein:
  - a. "State Agency" shall mean an executive branch agency, department, division, board, commission or entity of the executive branch.
  - b. "Public Official" shall mean a commissioned, an unclassified or a nonclassified executive branch employee but shall not include any commissioned, unclassified, or nonclassified elected by the legislature.
  - c. "Public Employee" shall mean a classified employee of a state agency.
  - d. "Conflict of Interest" shall mean a situation, circumstance, or financial interest which has the potential to cause a private interest to interfere with the proper exercise of a public duty.
- **III. Conflict of Interest**
  Public employees and public officials shall avoid conflicts of interest or the appearance of a conflict of interest. Public employees and public officials shall not participate in any matter in which they, or their spouse or dependents, have a private interest which may directly or indirectly affect or influence the performance of their duties.
- **IV. Misuse of Position**
  No public official and no public employee shall disclose or use confidential or privileged information for personal benefit or for financial gain. Public officials and public employees shall not use their positions with the government to secure privileges or advantages for themselves, which are not generally available to governmental employees, or to secure governmental privileges or advantages for others.
- **V. Acceptance of Campaign Contributions**
  A public official or a public employee who is candidate for an elective office that is not subject to the reporting requirements of RSA 664 and who accepts a financial contribution or other form of political contribution from an entity which is or is likely to become subject to that public official's or public employee's duties shall make a disclosure of such contributions in writing on the form appended hereto, within five (5) days of receipt of such contributions, to the Secretary of State.
- **VI. Acceptance and Giving of Gifts**
  No public employee, no public official, and no public employee's or public official's spouse or dependents, shall give, solicit, accept or agree to accept a gift from a person who is subject to or

likely to become subject to or interested in, any matter or action pending before or contemplate by

the public employee or official or by the governmental body with which that employee or official is affiliated. Nothing in this section shall be construed to prohibit gifts made to the state of New Hampshire and accepted in accordance with the law.

- **VII. Post Employment Restrictions**
  For one year after leaving office or employment with the state, a public official shall not appear as a lobbyist or as a paid advocate on behalf of any matter over which that official had personal and direct responsibility while in state government.
- **VIII. Supplemental State Agency Ethical Codes**
  In addition to this Code, each state agency may promulgate a supplemental ethics code to address issues specific to that agency. In the event of a conflict, the provisions of this Code shall supersede the agency code. To the extent that this Code or an ethics code adopted by a state agency shall apply to classified employees, this Code, or an agency code, shall be interpreted to be consistent with the provisions of the classified employees' collective bargaining agreement.
- **IX. Financial Disclosure**
  To ensure that the performance of official duties does not give rise to a conflict of interest or the appearance of a conflict of interest, the following public officials shall file with the Secretary of State a statement of financial disclosure that conforms to the requirements of the form appended hereto: a) all agency heads, and b) any public official designated, due to the responsibilities of the position, by the agency head. The agency head shall file with the Secretary of State an organizational chart identifying the names, titles and position numbers of officials required to file a statement of financial disclosure.
  The statement of financial disclosure and organizational chart shall be filed within thirty days of the effective date of this order. Thereafter, revised statements of financial disclosure and organizational charts shall be filed immediately upon any change of status. New agency heads shall file a statement of financial disclosure no later than the first day of service.
  Statements of financial disclosure and organizational charts filed with the Secretary of State shall be public documents.

INMATE REQUEST SLIP

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, NOT the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

TO: Unit Supervisor, Security Lieutenant, or CC/CM **DATE:** Thursday 12-8-05

FROM: Wolff (Last Name) Charles (First Name) J (Middle Initial) **ID #:** 24322

South (Housing Unit) 2-C-3B (Pod/Tier/Div. Cell) N/B (Work/Shift)

INMATE REQUEST: Good Morning:
- It is very important that I meet with you:
- Thank you:
"For I am getting very ill"
"For lack of nutrition"
"etc"
"I.G. pp. 7.1 #9"

Respectfully—
Charles J Wolff

(If you need more space, use plain paper.) *Inmate Signature*

TO: Dietition — **DATE:**

FROM: Unit Supervisor, Security Lieutenant. or CC/CM

REMARKS:

Staff Signature

TO: C. Wolff (Inmate) MS (Housing Unit) (Cell #) **DATE:** 12/19/05

FROM: J. Leeka, RHIA

REMARKS: We currently do not have a dietician, what is your question?

Staff Signature

See MH Admin note
Ccl 30/03

Received By Charles J Wolff *Inmate Signature*

JAN 1-4-06

INMATE REQUEST SLIP

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, **NOT** the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

Monday

TO: Unit Supervisor, Security Lieutenant, or CC/CM **DATE:** 12-26-05

FROM: Wolff Charles J. **ID #:** 24322

Last Name First Name Middle Initial

South 2-C-3B A/B

Housing Unit Pod/Tier/Div. Cell Work/Shift

Page 1 of 3

INMATE REQUEST: *Good Morning - Dr. Englander - MD) When we met on December 1st 2005 I spoke to you in regards that I am on a Kosher Diet and I asked you to provide a medical pass to the kitchen that I do not eat soy-tofu-or-the kosher fish - for they cause me to have a reaction to them and I get very ill - you told to destroy the meal I couldn't eat and return it to the servine and you said after a while the would realize that it is cost the money and would stop giving the above to me - on December 16th 2005

Charles J. Wolff

(If you need more space, use plain paper.)

Inmate Signature

TO: Dr. Englander C/O H/C **DATE:** 12/26/05

FROM: Unit Supervisor, Security Lieutenant. or CC/CM

REMARKS: Please Review and Advise

Staff Signature

TO: C. Wolff MS **DATE:** 1/3/06

Inmate Housing Unit Cell #

FROM: J. Leeka, RHIA

REMARKS: Mr. Wolff I have told you this once and now I'm telling you for the last time. You elected a kosher diet for religious purposes not medical. Religious diets are the responsibility of the Chaplain's office and Jeff Perkins in the kitchen. HSC has not part or responsiblity for any issues with religious diets. Take your problems to the chaplain and/or Jeff Perkins.

PLEASE SEE N.H. ADMIN RULES COR 301.03

Staff Signature

Received By Charles J. Wolff

Inmate Signature

White - Offender Records Yellow - Inmate Pink - Staff SP-014 (A) REV. 3/98

CHARLES JAY WOLF V DEPARTMENT OF CORRECTION NEW HAMPSHIRE CIVIL NO. 06-CV-321-PB

LEXSTAT N.H. ADMIN RULE COR 301.03

NEW HAMPSHIRE CODE OF ADMINISTRATIVE RULES
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*** THIS DOCUMENT IS CURRENT THROUGH NOVEMBER 2006 ***

DEPARTMENT OF CORRECTIONS
CHAPTER Cor 300 OPERATION AND MANAGEMENT OF CORRECTIONS DEPARTMENT ACTIVITIES
PART Cor 301 STANDARDS OF OPERATION, MANAGEMENT AND ADMINISTRATION OF STATE CORRECTIONS FACILITIES

N.H. Admin. Rules, Cor 301.03 (2006)

Cor 301.03 Food Service.

(a) Each inmate shall be given the opportunity to have 3 wholesome and nutritious meals each day served with proper eating and drinking utensils.

(b) Efforts shall be made to ensure that food that is supposed to be served hot shall be served hot, and food that is supposed to be served cold shall be served cold.

(c) Restrictions on the type of food or utensils provided to residents shall be imposed if the resident throws his/her food or uses his/her food to make the area unclean, unhealthy, unsafe, or is likely to use such items as weapons against him/herself or others.

(d) Each resident shall be served the same quality of food in a quantity sufficient to meet the resident's nutritional needs.

(e) Availability of special diets shall not be dependent upon custodial or disciplinary status.

(f) There shall be a varied menu that provides for a regular variety in meals.

(g) The food served to residents shall be properly prepared and served under the direction of the chief steward.

(h) Menu planning, food purchasing, and sanitation shall be overseen by a dietician to ensure that meals are wholesome and nutritious. A dietician shall provide staff and residents training in food handling, preparation and medical diet supervision. The dietician shall also assist in the implementation of recommendations of the of the DHHS, office of community and public health.

(i) Food shall be served, prepared and stored in accordance with He-P 2300. Food service equipment shall be maintained in good working condition.

(j) All kitchen employees including the residents shall be trained in the handling and preparation of food by the dietician and chief steward. Staff hired for food service duty shall be qualified by experience, training or education for the position. THIS IS NOT DONE THE PRISON VIOLATES THE HEALTH LAWS

(k) All persons who assist in the preparation or serving of food shall have a medical examination prior to such job assignment to determine their medical suitability for such work, and reexaminations at 6-month intervals.

(l) Each resident who requires a special diet certified by a prison physician shall be provided a diet to meet the resident's medical needs.

(m) Special diets for religious purposes shall be made available by the use of substitutes of approximate nutritional value, as determined by the department's dietician for those food items which conflict with the dietary requirements of a resident's religion.

(n) Adequate alternatives of equivalent nutritional value shall be made available for vegetarians.

STATUTORY AUTHORITY: RSA 21-H:13, RSA 622:44; RSA 651:2

Effective Date: See Revision Note Below
Superseded: # 7448, eff 2/6/01, exp 2/6/09

FEB 15 2006

INMATE REQUEST SLIP

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, **NOT** the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

Wednesday

TO: Unit Supervisor, Security Lieutenant, or CC/CM **DATE:** 2-8-2006

FROM: Wolff Charles J **ID #:** 24322
Last Name First Name Middle Initial

South 1a-7B A1B Page 1 of 5
Housing Unit Pod/Tier/Div. Cell Work/Shift

INMATE REQUEST: Good Morning - Mr. Robert - Mac-Leod. - I - Thank - You - For - Your - Reply - To - Me - Dated - 2-3-2006 Which - I - Received - Today - For Which - I - Am - Most - Grateful My - Reply - To - Your - Question - I Quote Nurse Coordinator - Donna - Timulty - On - 2-6-2006 "Charlie As I Told - You - Before Medical Has - Nothing - To - Do - With - Your - Kosher Diet." I Am Sure The - Medical - Has Not Read Federal or State Laws Of Mr. Jeff Perkins - Mr. Jeff Perkins Does Not Comply To My Medical or Jewish Laws Of =

(If you need more space, use plain paper.)

Charles J Wolff
Inmate Signature

TO: Mr. Robert Mac-Leod **DATE:** 2-9-06

FROM: Unit Supervisor, Security Lieutenant, or CC/CM

REMARKS: Mr McLeod why he is writing to you is because he feels what he is being given to eat directly effects his health and for that reason is a medical issue. He is telling you he can not eat eggs, soy, chicken, TOFU and regular kitchen bread. See attached from Ms Timulty

Unit Manager of the South Division My Unit Manager

John J. [illegible]
Staff Signature

TO: Charles Wolfe **DATE:** 2/22/06
Inmate Housing Unit Cell #

FROM: Dr Bob MacLeod

REMARKS: This is a religious diet issue
Other nutritional concerns please contact Health Svcs

Robert MacLeod
Staff Signature

Received By Charles J Wolff
Inmate Signature

INMATE REQUEST SLIP

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, **NOT** the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you. Thank you

TO: Unit Supervisor, Security Lieutenant, or CC/CM **DATE:** 11-3-05

FROM: Wolff (Last Name) Charles (First Name) J (Middle Initial) **ID #:** 24322

South (Housing Unit) 2-C-3B (Pod/Tier/Div. Cell) A/B (Work/Shift)

INMATE REQUEST: Do to the fact of Mr Jeff Perkins-Kitchen- is so deeply concerned about my kosher diet - which I am very pleased to hear that I am a student in your PFS class -
I am requesting that you obtain 2 sets of pots pans plus 2 sets of utensils and cleaning supplies for ??? etc to be kept in a locked locker which no one will be able to use - according to Jewish law - respectfully - except for another Jewish person - also all products to cook with and all comparable foods for other students

(If you need more space, use plain paper.) Charles J Wolff Inmate Signature

Thank you

TO: Mr Robert Kroll PFS Instructor Voc/education **DATE:**
CC X-Y-Z+

FROM: Unit Supervisor, Security Lieutenant. or CC/CM

REMARKS:

Staff Signature

TO: Charles J. Wolff (Inmate) South (Housing Unit) 2-C-3B (Cell #) **DATE:** 11/30/05

Note

FROM: Robert Kroll FSMP/CA Voc-Training

REMARKS: After having a conversation with my superiors they have concluded that Voc-Training is a voluntary program. Since the program does not offer Kosher cooking as part of its curriculum you have a choice to learn what is offered or to leave the prog. As in many other Voc-Programs Kosher cooking is a small subject but the lab components are not worked with. Therefore the program will not be expanded.
As per
Dan Walsh
Jay Nagy
John Kovacs
Warden Cattell

Robert Kroll
Staff Signature

Thank you -

Received By Charles J Wolff
Inmate Signature

White - Offender Records Yellow - Inmate Pink - Staff SP-014 (A) REV. 3/98

DEPARTMENT OF CORRECTIONS
STATE OF NEW HAMPSHIRE
P.O. Box 14
CONCORD 03301

JEANNE SHAHEEN
GOVERNOR

HENRY RISLEY
COMMISSIONER

DEC 19 2005

PAGE 1 of 3
Plus Grievance #'s one (1) Two (2) three (3) Four (4)

GRIEVANCE FORM

(See Reverse for Instructions)

1. Date: December 16, 2005
2. GRIEVANT: Charles Jay Wolfe
3. Number: 24322
4. Address: 281 North State Street - Concord, NH 03302 South
5. Brief Description of Grievance: Against the Female Line Server Gency spelling may not be correct - though the attached grievance forms will give the facts and their dating - she has caused me mental and emotional damage for the following reasons and the other inmate line server in those dates: 1. Using profane language about me - my race - my creed - my religion - slander, in an earnest way to mock me - violating my rights under the Constitution of the [illegible]

Signature: Charles Jay Wolfe

You will be penalized if statements are untrue. Use Attachments if necessary.

TO: **DIRECTOR** (Warden) Date of Director's Action:

Director's Action:

Authentication:

TO: **COMMISSIONER** "Wrenn" or "Cumm" Date of Commissioner's Action: 12/23/05

Commissioner's Action: Warden Cattell responded to your grievance (same subject) on 12/6/05. This office accepts and adopts that response.

The grievance is denied.

Pleasure Took me off my kitchen part and when I asked - him why I wasn't [illegible] he said and you do not deserve a kitchen job [illegible]

Authentication: [signature]

FORWARD ALL THREE COPIES. WHITE WILL BE FILED IN OFFENDER RECORD, CANARY TO RESPONDER AND PINK TO GRIEVANT.

SP-52

Charles Jay Wolff 24722

PAGE # 2 OF 3 OF MY GRIEVANCE TO: COMMISSIONER: WILLIAM WRENN DATE DECEMBER 16, 2005

UNITED STATES OF AMERICA OR AMERICA'S ADMENDMENTS 1ST-14TH AND UNITED STATES TITLE 42 ETC

THE FEMALE LINE SERVER GENTLY HAS CAUSED ME EMOTIONAL AND MENTAL DAMANGE BY HERSELF AND ALSO BY ALLOWING THE OTHER INMATE LINE SERVERS TO ALSO EMBARASS ME INFRONT OF OTHER INMATES UNDER HER GENERAL SUPERVISION BECAUSE THEY FELT THAT SHE GENTLY IS A MEMBER OF THE DEPARTMENT OF CORRECTIONS OF THE STATE OF NEW HAMPSHIRE - THEREFORE GENTLY AS A MEMBER OF THE ABOVE AGENCY HAS ALLOW VIOLATED PPD 2.30 BECAUSE OF WHAT WARDEN BRUCE CATTEL ON GRIEVANCE #3, DATED 12-6-05 HAS NOT BEEN RESPECTED BY HIS STAFF - AGAIN I WAS HARRASSED - BY THE MAIN LINE AND INMATE LINE SERVERS ON DECEMBER THE 9TH AND 10TH AND BY AGAIN THE FEMALE LINE SERVER GENTLY ON THE 11TH OF DECEMBER 2005 - WHEN I WAS AT DINNER KOSHER DIABETIC - PLEASE SHE GENTLY IN A LOW TONE SAID KOSHER AND THEN SAYS NEXT-NEXT-NEXT ETC - ETC AND I WAS BEING STEPPED ON, PUSHED, SHOVED AND BEING TOLD BY OTHER INMATE "GET OUT OF THE WAY JEW AND LET US EAT." THEN I STARTED TO LEAVE THE OFFICE SAID "WHAT'S WRONG" I TOLD HIM THE ABOVE AND HE [illegible] DID NOTHING OFFICER BRITAIN ASKED WHAT WAS WRONG I TOLD HIM HE THEN WENT TO ASK GENTLY AND SHE SAID IN A LOUD VOICE "HE IS NOT GOING TO GET A CELL FEED" SGT O'BRIEN OF THE SOUTH UNIT CAME TO MY

Charles Jay Wolff
ID 24322

Page # 3 of 3 of my Grievance
To
Commissioner William Wrenn. Date: December 16, 2005
Stephen Curry

Quarters in front of my Room mate on Sunday the 11th of December 2005 approx 5-pm on 1710 hours. He stated that the female "Genley" called and states that I did not eat. Sgt O'Brian was very concerned and asked me if I had anything to eat. I said yes. He says to me if I have any problem to have someone to get in touch with him right away.

I ask the question what happens to a Diabetic when they do not get proper nourishment because members who supply nourishment fails to and at the same time feel they can give nourishment. These actions are an almost daily routine that I have to take — why — and for some reason they feel they can and that they are above the law which protects the people they are hired to perform their duty — not only of their job discription but also by the laws of the United States of America and those of the State of New Hampshire which they are employed and also governed by the state laws, Rules, RSA, and PPD's etc — this grievance is against the members and head Inmates who are involved.

Yes I am very upset because what I am going through and that the staff is not complying with warden

Respectfully,
Charles Wolff

RECEIVED
NOV [illegible]
WAR[illegible]

1

DEPARTMENT OF CORRECTIONS
STATE OF NEW HAMPSHIRE
P.O. Box 14
CONCORD 03301

JEANNE SHAHEEN
GOVERNOR

HENRY RISLEY
COMMISSIONER

GRIEVANCE FORM

(See Reverse for Instructions)

1. Date: 11-17-05

2. GRIEVANT: Charles Jay Wolff 3. Number: 24322

4. Address: 281 North State Street - Concord, NH - 03302 South Unit

5. Brief Description of Grievance: ① That I have been told by Mr. Jeff Perkins - Kitchen that he is checking my canteen purchases during the week of October / 05 2005 - this was before I was on my Kosher Diet -
② I was told by a male line server on Dinning Hall #1 - that Mr. Jeff Perkins and also Mr. Paul LaFlam - telling may not be correct - both of the inmer Kitchen staff to my PFS instructor Mr. Robert Kallo to write down everything I ate in the Kitchen class room - thus putting my instructor in harms way

Signature: [signature]

You will be penalized if statements are untrue. Use Attachments if necessary.

[illegible] see attached [illegible]

I am making you aware of what is going on - Because I was not on a Kosher Diet at that time

TO: DIRECTOR (Warden) Date of Director's Action: ______

Director's Action: ______

Authentication: ______

TO: COMMISSIONER Date of Commissioner's Action: ______

Commissioner's Action: ______

Authentication: ______

FORWARD ALL THREE COPIES. WHITE WILL BE FILED IN OFFENDER RECORD, CANARY TO RESPONDER AND PINK TO GRIEVANT.

SP-52

INMATE REQUEST SLIP

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, NOT the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

TO: Unit Supervisor, Security Lieutenant, or CC/CM **DATE:** Thursday 10-20-05

FROM: Wolff (Last Name) Charles (First Name) T (Middle Initial) **ID #:** 24322

South (Housing Unit) 2-C-7B (Pod/Tier/Div. Cell) N/A (Work/Shift)

INMATE REQUEST: I Am Filling The Following Grievance Against Jeff Perkins For the Following Two Reasons 1st Instructing my Instructor to Write Down every thing that I eat in Class - Therefore putting my Instructor in a position for fear of my Classmates of being - Prison Term "A Rat" 2nd - Having Security Concern Regarding Request To him of all Non-Kosher Food I Have purchased in the Canteen - For Knowing the Rules of the "Torah" He Has Caused Me mental and emotional Damage - By Having me Embarrassed and Having me To Look over my Shoulder - He Has Also Also PPD 230 not Read the proper PPD's - Respectfully,

(If you need more space, use plain paper.) Charles Wolff
Inmate Signature

TO: Lt Schofield / South Unit **DATE:**

FROM: Unit Supervisor, Security Lieutenant, or CC/CM

REMARKS:

Staff Signature

TO: Charles Wolff (Inmate) MCS (Housing Unit) 2C (Cell #) **DATE:** 11-10-05

FROM: Unit Manager

REMARKS: I spoke with Mr. Kroll and he told me you are following your kosher dietary guidelines in this class. I told him not to document what your eating even though kitchen staff wanted this done.

[illegible signature]
Staff Signature

Received By Charles J. Wolff
Inmate Signature

White - Offender Records Yellow - Inmate Pink - Staff SP-014 (A) REV. 3/98

2

DEPARTMENT OF CORRECTIONS
STATE OF NEW HAMPSHIRE
P.O. Box 14
CONCORD 03301

RECEIVED
NOV 21 2005
NHSP/M
WARDEN'S OFFICE

JEANNE SHAHEEN
GOVERNOR

HENRY RISLEY
COMMISSIONER

GRIEVANCE FORM

(See Reverse for Instructions)

1. Date: 11-17-05

2. **GRIEVANT:** Charles Jay Wulff

3. Number: 24722

4. Address: 281 North State Street - Concord, NH 03302 - South unit

5. Brief Description of Grievance: On Sunday the 23rd of October 2005 myself and my religion was abused by the female staff line server on dinning hall #1 - also attached is a statement of a witness Mr. James Kl[illegible] on the 24th day of October 2005 - Her ways of treating all inmate is abusive - Also attached is my inmate request slip dated 10-23-05 to Lt Schofield - south unit

Signature: [signature]

You will be penalized if statements are untrue. Use Attachments if necessary.

TO: **DIRECTOR** (Warden)

Date of Director's Action: ____________

Director's Action: ____________

Authentication: ____________

TO: **COMMISSIONER**

Date of Commissioner's Action: ____________

Commissioner's Action: ____________

Authentication: ____________

FORWARD ALL THREE COPIES. WHITE WILL BE FILED IN OFFENDER RECORD, CANARY TO RESPONDER AND PINK TO GRIEVANT.

SP-52

Attachment 1

NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS

MEDICAL/RELIGIOUS DIET ORDER

Please fill in Section A and F plus other applicable sections (B,C, D, E). This form is to be utilized for all new diet orders, changes, renewals, discontinued diets and consult requests. When completed, please forward to the Dietitian within 24 hours. The physician's order (yellow copy or copy) must be attached.

A. INMATE NAME ______________________ ID# ________ HOUSING __________
Diagnosis ______________________ Ht. ________ Wt. __________

B. MEDICAL DIET PRESCRIPTIONS: (circle one) New Change Renew
Beginning Date ____________________ X 180 days, or other timeframe ______________

______ Diabetic/ADA Taking Insulin? (circle) Yes No
(circle one) 1800 2200 2600 2900 No concentrated sweets
______ Textured diet (circle one) clear liquid full liquid pureed soft mechanical soft
______ Prenatal (pt. Age ________ trimester ________) AM orange juice/HS snack
______ Supplemental/Snack ______________________
______ Other: ______________________
______ DISCONTINUE MEDICAL DIET (D/C diet/begin house diet)
______ Waiver signed by patient (copy attached) D/C diet

C. CONSULTATION ORDER/REQUEST
______ Nutritional Assessment ______________________
______ Supplement/Snack Assessment ______________________
______ Weight: Gain ________ since ________, Loss ________ since ________

______ Other ______________________
______ Provide diet education: ______________________

D. RELIGIOUS DIET ORDER: (circle) **Kosher** Vegetarian **Vegetarian-no egg**
Chaplain's signature and date ______________________

E. COMMENTS:

F. Preparer's Signature ______________________ Date ______________

Ordered by MD/PA/ARNP/RN (temporary texture only) ______________________

Attachment 2

Please read the notice on the right hand side and answer the following questions:

Inmate Name & Number ______________________________
(please print)

I am a member of the _________________________ religion.

I have been a member for ___________________ years/months.

My religion requires its members to adhere to the following diet (Please describe diet requirements)

____
____
____
____

I understand and agree to the rules established by the institution regulating special diets.

____________ ______________________________
Date Signature

RELIGIOUS DIETS

- TO BE PUT ON A RELIGIOUS DIET, YOU MUST BE AN ACTIVE PARTICIPANT OF A RECOGNIZED RELIGION WHOSE DOCTRINE REQUIRES THE TYPE DIET YOU ARE SEEKING. IF YOU ARE NOT A MEMBER OF A RELIGIOUS GROUP REQUIRING DIETARY RESTRICTIONS, YOU DO NOT QUALIFY FOR A RELIGIOUS DIET.
- IF YOU ARE PLACED ON A SPECIAL DIET AND ARE OBSERVED EATING OR BUYING FOODS THAT ARE RESTRICTED, YOU WILL BE REMOVED FROM THE DIET.
- IF AFTER READING THIS YOU FEEL YOU MEET THE REQUIREMENTS FOR A RELIGIOUS DIET, PLEASE FILL OUT THIS FORM AND RETURN IT TO THE CHAPLAIN'S OFFICE.

____
CHAPLAIN

NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS
Faith Group Overview

Faith Group	Diet Considerations, Fasts & Feasts	Worship Practices/ Personal Group	Allowable Personal Items	Allowable Personal Items Kept in Group Locker
Buddhist	Vegetarian	P - Individual Choice G - None at present	1 Medallion* 1 Set of Malas (prayer beads) 1 Set of Boading Balls 1 Meditation Journal 1 Meditation Bag	1 Zabuton (prayer mat) 1 Zafu (prayer cushion)
Catholic	Meatless entrée on Good Friday and Fridays throughout Lent	P - Individual Choice G - Mass/Communion Service	1 Medallion* 1 Rosary 1 Scapular	
Islam/Muslim	Non-pork Vegetarian Ramadan Fast sun-up to sun-down 29-30 days Eid ul Adha Feast Eid ul Fitri Feast	P - Pray 5 times daily for approximately 10 min. (before sunrise, before noon, after noon, before sunset, after sunset) – **Shave waiver allowed** G - Friday Jumah Service	1 Medallion* 1 Prayer Ring 2 Kufi (skull cap) 1 Strand Prayer Beads	
Jehovah's Witness	None	P - Individual Choice G - Group services and Book Studies	1 Medallion*	
Followers of Judaism	Kosher	P - Individual Choice G - None at present – **Shave waiver allowed**	1 Medallion* 1 Yamulke (skull cap)	Phylacteries (leather prayer strap-like head garment
Followers of the Native American Path	Feasts: Winter Solstice Spring Equinox Summer Solstice Fall Equinox	P - Individual Choice G - Circle Meetings, Pipe Ceremonies	1 Native Choker 1 Beaded necklace w/fetish attached* 4 Feathers 5 Bandanas worn sweatband style, 3" fold 1 Medicine bag - may be kept on person at all times, in or under clothing. Staff may inspect contents, touched only by owner. **Contents may include a pinch (the size of a pencil eraser) of any botanical material allowed in a group setting, and a small number of sentimental objects such as a small stone, bone, feather, etc… Items must not pose a security risk.**	
Neo-pagan	Non-pork Vegetarian	P - Individual Choice – **Shave waiver allowed for Asatru followers only** G - Group services and studies	1 Medallion* 1 Wand - 6", wood/porcelain w/crystal tip Up to 24 power stones in box or bag - solid stone	

Neo-pagan (continued)	Feasts: Imbolc Beltaine Lughnasadh Samhuinn		energy spheres must fit in closed hand 1 Pentacle five-sided star - wood or porcelain Meditative cards (pictures) and Mandala (could be pictures, posters, or paintings w/fur, bone or feathers attached) 1 Set of Divination Tools (can be runes, stones, bones, sticks pendulums, wooden tiles or cards) and four casting cloths, handkerchief sized Scrolls (blank or written upon) 4 Feathers Book of Shadow (blank book in which to write spells) - to be kept in or with religious box. Spirit Bag – may be kept on person at all times, in or under clothing. Staff may inspect contents touched only by owner. Contents may include a small number of sentimental objects such as a small stone, bone, feather, etc… Items must not pose a security risk.	
Protestant/Christian	None	P - Individual Choice G - Group services and studies	1 Medallion*	None
Rastifarian	Non-pork Vegetarian	P - Individual Choice – Shave waiver allowed G - None	1 Medallion*	None
Seventh-Day Adventist	Vegetarian	P - Individual Choice G - Group services on Saturday	1 Medallion*	None
Siddha Yoga	Vegetarian	P - Individual Choice G - Group services and studies	1 Medallion* 1 Set of Malas (prayer beads) 1 Meditation mat	
Taoist	Non-pork Vegetarian Feasts: Not more than four annually	P - Individual Choice -- Shave waiver allowed G - Group services and studies	1 Medallion* 1 Hat 3 I-Ching coins 1 Set of Malas (prayer beads) I set of Boading Balls 1 Meditation Journal 1 Meditation Bag	1 Zabuton (prayer mat) 1 Zafu (prayer cushion)

Notes: The following medallions will not be allowed: Swastika, Iron Cross, Inverted Cross, Five-point cross or any medallion identified as gang-related. * Medallions must be purchased shipped direct from a supplies, must not be larger than 1 ¼" diameter, and must not exceed $50.00 in value. Some of these items, while acceptable in general population, may be restricted if the inmate is removed from general population status, or any time security deems is necessary for safety reasons. All inmates, regardless of affiliation, are allowed: 1 medallion and religious books; tapes; literature and one religious calendar.

Attachment 3
Page 3 of 3

NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS

Faith group Property List

Pagan	Native American	Islamic	Siddha Yoga	Taoist
Altar Piece (wooden obelisk) Bees wax candles (2) Black leather bag with 24 runes Black leather bag with 42 runes Brass incense burner Candle holders (3) Assorted candles (20 +/-) Chalice Charcoal for incense Cloth turtle Cow bell Gandar (wand - 2) Goddess candle Handkerchief with wood runes Incense (assorted - 200 +/-) Large cast iron cauldron Large wooden runes (12+) Misc. bones and rocks Misc. leather and cloth swatches Offerings (in folded envelope) Prayer flags (13+) Scrying mirror wrapped in cloth Shell Silk altar cloth (2) Small black bag w/chalk Small brass bell Small porcelain cauldron Steel oath ring in cloth pouch Wooden bowls (2) Wooden disc (7) Wooden rectangle in leather pouch God/goddess statutes Drum Flute Drinking horn	Assorted sticks Beans Blanket Cedar Cedar bark boat Cotton fabric (misc. colors) Cups Dream catchers Dried corn Drums Drum beaters Flutes Leather Leather medicine wheel Mandellas Native blue corn Partial hawk wing Pictures Pipe bundle Prayer flags Prayer ties Rattles Red felt Sage Shells Sinew Songbooks Spoons Squash seeds Sweet grass Talking sticks Tin w/cedar Turkey feather Bitterroot	Prayer caps (3) **Buddhist** Buddha statute Candles Bell Incense	Ceramic bowl Framed picture of Gurumayi Wooden incense box & burner Assorted incense (200 +/-) Puja Cloth Small statue for puja Linga & Yoni (stones	Altar cloth Bowls (3) Chaice Singing bowls Statue Stones and crystals Taiiji balls Candles (20 +/-) Cauldron Chimes Drum Prayer flags Incense

Notes:

1. **Books, pamphlets, papers, newspapers, cassette tapes, CDs and videos are not listed on these lists as all groups are allowed these items. Cassette tapes, cd's, dvd's, and videos are kept in the Chapel Library**
2. **Statues/icons; no group may posses more than two statues and these must be no taller than 18 inches**
3. **Office supplies such as markers and erasers may be kept with group property, but they are not listed, as they are not items of a religious nature**